ATTACHMENT 6 BID/BIDDER CERTIFICATION SHEET

Only an individual who is authorized to bind the bidding firm contractually shall sign the <u>Bid/Bidder Certification Sheet</u>. The signature must indicate the title or position that the individual holds in the firm. This Bid/Bidder Certification Sheet must be signed and returned along with all "required attachments" as an entire package with <u>original signatures</u>. The bid must be transmitted in a sealed envelope in accordance with IFB instructions.

- A. Our all-inclusive bid is submitted in a sealed envelope marked "Bid Submittal Do Not Open".
- B. All required attachments are included with this certification sheet.
- C. I have read and understand the DVBE participation requirements and have included documentation demonstrating that I have met the participation goals.
- D. The signature affixed hereon and dated certifies compliance with all the requirements of this bid document. The signature below authorizes the verification of this certification.
- E. The signature and date affixed hereon certifies that this bid is a firm offer for a 90-day period.

An Unsigned Bid/Bidder Certification Sheet May Be Cause for Bid Rejection

1. Company Name	2. Telepho	one Number	2a. Fax Number	
Anton's Service Inc.	(6/9)	579-9000	(619) 749-5597	
2b. Email Address anton @ anton service	, (um			
3. Address				
PO Box 455, Laheside CA	92040			
Indicate your organization type:			· —	
4. Sole Proprietorship 5	5. Partners	ship 6. K Corporation		
Indicate the applicable employee and/or corporation number	er:	1	•	
7. Federal Employee ID No. (FEIN) 51-05345	10	8. California Corp	ooration No. 2587454	
Indicate the Department of Industrial Relations information	ı :			
9. Contractor Registration Number /00000				
Indicate applicable license and/or certification information	:	l =====		
10. Contractor's State Licensing Board Number		11. PUC License Number CAL-T-		
861069		N/A		
007007		, ,		
12. Bidder' Name (Print) Anton Botter II		13. Title	÷	
-Inton Botter 18		Presi	dent	
14. Signature	15. Date 3-21-2017			
	3-21-2017			
16. Are you certified with the Department of General Serv	ices, Office of	Small Business and	l Disabled Veteran Business	
Enterprise Services (OSDS) as: a. Small Business Enterprise Yes X No	h Disable	d Votoran Businaga	Enterprise Vec No D	
If yes, enter certification number:	bled Veteran Business Enterprise Yes No neter your service code below:			
42379		, , , , , , , , , , , , , , , , , , , ,		
NOTE: A copy of your Certification is required to be inclu	ded if either of	the above items is a	checked "Yes"	
Date application was submitted to OSDS, if an application		the doore from is		
		d Conall Dusings S	hanting to a Postinia stice	
17. Are you a Non-Small Business committing to the use of Yes No 🔀	n 23% Certine	a Sman Business St	ibcontractor Participation?	
If Yes, complete and return the Bidder Declaration form, G	SPD-05-105 w	ith your bid.		

STATE OF CALIFORNIA · DEPARTMENT OF TRANSPORTATION **BID PROPOSAL**ADM-1412 (REV. 06/02)

ATTACHMENT 1

_		_	I	1	Í	1	ı	ı	I	ا ما
(2) IN CASE OF DI BASIS ITEM, TI		(1) THE ABOVE Q OF BIDS. NO (NEEDED.	o	(Ji	4	ω	2		ITEM NO.	CONTRACTOR'S NAME (Please Print):
IN CASE OF DISCREPANCY BETWEEN THE UNBASIS ITEM, THE UNIT PRICE SHALL PREVAIL.		UANTITIES ARE GUARANTEE IS N	100	20	250	300	80	1200	(B) ESTIMATED QUANTITY	TOR'S NAME (Please Prin
TWEEN THE UNIT PRICE A		ESTIMATES ONLY AND ARI MADE OR IMPLIED AS TO T	Per Hour	Per Crew Hour	Per Crew Hour	Per Hour	Per Crew Hour	Per Crew Hour	(C) UNIT OF MEASURE	ř
(2) IN CASE OF DISCREPANCY BETWEEN THE UNIT PRICE AND THE TOTAL SET FORTH FOR A UNIT BASIS ITEM, THE UNIT PRICE SHALL PREVAIL.		(1) THE ABOVE QUANTITIES ARE ESTIMATES ONLY AND ARE GIVEN AS A BASIS FOR COMPARISON OF BIDS. NO GUARANTEE IS MADE OR IMPLIED AS TO THE EXACT QUANTITY THAT WILL BE NEEDED.	Premium Hours Traffic Control	Premium Hours Stump Removal Crew	Premium hours Tree Removal Crew	Regular Hours Traffic Control	Regular Hours Stump Removal Crew	Regular Hours Tree Removal Crew	(D)	CONTRACT NO.
	TOTAL THIS PROPOSAL	TOTAL THIS SHEET	\$ 180,00	\$ 80.00	\$ 340.00	\$ 120.	\$ 50,-	\$ 225	(E) UNIT PRICE (In Figures)	PAGE 1
#414,600.00		9414,600	\$ 18,000,00	\$ 1600,	\$ 85,000	\$ 436,000	\$ 4000	\$ 270,000.0	(F) TOTAL (In Figures) (B) X (E) =(F)	OF 1

⁽³⁾ ANY BID MAY BE REJECTED IF IT IS UNREASONABLE AS TO PRICE UNREASONABLENESS OF PRICE INCLUDES NOT ONLY THE TOTAL PRICE OF THE BID, BUT PRICES FOR INDIVIDUAL LINE

ATTACHMENT 2

State of California—Department of General Services, Procurement Division GSPD-05-105 (EST 8/05)

Solidation Number 11/12542

BIDDER DECLARATION

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identify current California certification(s) (MB, 6B) SB/NVSA, DVBEJ: 5/3 or Mone (If"None", go to Item #2)

e.g., list the proposed products produced by your firm, state if your firm owns the transportation vehicles that will deliver the products to the State, identify which solicited services your firm will perform, etc.). Use additional sheets, as necessary. Will subcontractors be used for this contract? Yes X No __ (If yes, indicate the distinct element of work your firm will perform in this contract

Tree service, stump gainding, trucking, dumping

If you are a California certified DVBE:

provided in this contract (quantity and value)? Yes x No N/A

Ņ If no subcontractors will be used, skip to certification below. Otherwise, list all subcontractors for this contract (Attach additional pages if necessary):

Toler law 1010s mibles 0	ور بندن پور	Phodson Sufe T-114 Ports Po Bon 117 Po Bon 1	Subcontractor Name, Contact Person, Sub- Phone Number & Fax Number &
m, blue @ bscsewif. hysorias in	*****************************	***************************************	Subcontractor Address (M
	DVBE DVBE	Nort	CA Certification (MB, SB, DVBE or None)
* He (think) quit	Provide Tre Rowald	Traffic bakal	Work performed or goods provided for this contract
	\$%	3%	Corresponding % of bid price
	75	8	Good Standing?
	çs	\$	(Febrea 2)%

CERTIFICATION: By signing the bid response, I certify under penalty of perjury that the information provided is true and correct.

Page _____ of ____

ATTACHMENT 5

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES PROCUREMENT DIVISION

DISABLED VETERAN BUSINESS ENTERPRISE DECLARATIONS

STD. 843 (Rev. 5/2006)

Instructions: The disabled veteran (DV) owner(s) and DV manager(s) of the Disabled Veteran Business Enterprise (DVBE) must complete this declaration when a DVBE contractor or subcontractor will provide materials, supplies, services or equipment [Military and Veterans Code Section 999.2]. Violations are misdemeanors and punishable by imprisonment or fine and violators are liable for civil penalties. All signatures are made under penalty of periupy

civil penalties. All signatures are made under penalty of perjury.	TION 1	
	DVBE Reference	
	e Inc Number:	1798645
Description (materials/supplies/services/equipment proposed):	Labor	
Solicitation/Contract Number: //A 2542	SCPRS Referen Number:	ce
		(FOR STATE USE ONLY)
	TION 2	
APPLIES TO ALL DVBEs. Check only one box in Section 2 an		
 I (we) declare that the <u>DVBE is not a broker or agent</u>, as define materials, supplies, services or equipment listed above. Also Pursuant to Military and Veterans Code Section 999.2 (f), I (variable) principal(s) listed below or on an attached sheet(s). (Pursuant expended for equipment rented from equipment brokers pursuant toward the 3-percent DVBE participation goal.) 	o, complete section 3 below if we) declare that the <u>DVBE is a</u> nt to Military and Veterans Co	renting equipment. a broker or agent for the ode 999.2 (e). State funds
All DV owners and managers of the DVBE (attach additional pages with	h sufficient signature blocks for each	ch person to sign):
Marion Blue	Malle	3/21/17
(Printed Name of DV Owner/Manager)	(Signature of DV Owner/Manager)	(Date Signed)
(Printed Name of DV Owner/Manager)	(Signature of DV Owner/Manager)	(Date Signed)
Firm/Principal for whom the DVBE is acting as a broker or agent: (If more than one firm, list on extra sheets.)	(D-1-	A To NI N
(ii more than one iiiii, list on extra sheets.)	(Prir	nt or Type Name)
ď		
ď		
Firm/Principal Phone:		
e		
S		
S		
000	TION 2	
APPLIES TO ALL DVBEs THAT RENT EQUIPMENT AND DECLA	TION 3	DOMED
Pursuant to Military and Veterans Code Section 999.2 (c), (d) ownership of the DVBE, or a DV manager(s) of the DVBE. The accordance with Military and Veterans Code Section 999 et. S. The undersigned owner(s) own(s) at least 51% of the quantity for use in the contract identified above. I (we), the DV owners agency my (our) personal federal tax return(s) at time of certifications Code 999.2, subsections (c) and (g). Failure by the personal federal tax return(s) to the administering agency as a (c) and (g), will result in the DVBE being deemed an equipment	and (g), I am (we are) the DN he DVBE maintains certification of the DVBE maintains certification of the Police of each piece of	/(s) with at least 51% on requirements in quipment that will be rented nitted to the administering er as defined in Military and powner(s) to submit their
		and the second of
Disabled Veteran Owner(s) of the DVBE (attach additional pages with signal for the DVBE)	gnature blocks for each person to s	3/21/17
(Pripted Name) (Pripted Name) (Pripted Name) (Pripted Name)	(Signature)	(Date Signed)
(Address of Owner) San Diego C492116	(Telephone)	(Tax Identification Number
Disabled Veteran Manager(s) of the DVBE (attach additional pages with	sufficient signature blocks for eac	of Owner) h person to sign):
(Printed Name of DV Manager)	(Signature of DV Manager)	(Date Signed)

ATTACHMENT 10 Invitation for Bid No. 11A2542

QUOTES FROM SB OR DVBE SUBCONTRACTORS

Bidder shall attach copies of <u>SB OR DVBE SUBCONTRACTORS</u> quotes (on SB or DVBE's letterhead) from any SB or DVBE subcontractors listed in the form GSPD-05-105. Refer to instructions in IFB Section D), Items 1 C and 2 A 2).

* Please see attached

BSE Security Service, Inc.

CA PPO #17974 D-U-N-S #079807687 DBE/ACDBE #43840 DVBE/SB #1798645

8733 North Magnolia Avenue, Unit 116 Santee, California 92071

Tel. 619-368-3119 Fax. 844-716-8693 Email: m.blue@bsesecurityservice.com

March 21, 2017

To: Anton Botter II Anton's Service, Inc. 8865 Winter Gardens Blvd. Lakeside, CA 92040

RE: Tree Removal Labor - 11A2542

CONTRACT LOCATION: San Diego County

CONTRACT START DATE: May, 2017 **CONTRACT END DATE:** April, 2019

CONTRACTED TIMES: Per contract 11A2542

RATE PER Person: \$30.00hourly per Tree Removal Laborer

RATE OF SERVICE Daily/Weekly

Estimated 1200 hours at \$30.00 per hour for 1 Tree Removal Laborer

Total \$36,000.00

For any questions or if you require additional information, do not hesitate to call me at <u>619-368-3119</u> or contact me via email at m.blue@bsesecurityservice.com.

Regards,

Mu Be Marlon Blue

CEO

BSE Security Services

Tree Removal Labor-QUOTE